



CITY OF STAMFORD

AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

The City of Stamford is an equal opportunity/affirmative action employer
and strongly encourages the applications of women, minorities and persons with disabilities

Date Issued: 04/29/2014

FIREFIGHTER*

PROMOTIONAL EXAMINATION NO. 14-08

OPEN ONLY TO CURRENT CITY OF STAMFORD VOLUNTEER FIREFIGHTERS

LAST FILING DATE:

05/13/2014

SALARY: The base salary range is \$45,182 - \$69,274. Starting salary shall be at the lower rate.

DUTIES: Under the direct supervision of a Lieutenant or Captain, performs firefighting work in combating, extinguishing and preventing fires; and in the operations and maintenance of Fire Department equipment, apparatus and quarters; works on a rotating shift basis; does related work as directed.

MINIMUM QUALIFICATION REQUIREMENTS:

- At time of application, must have graduated from an accredited high school or received an equivalency diploma (G.E.D) from a recognized authority.
- At time of application, must be at least 18 years of age.
- At time of application, a \$35 non-refundable application fee. Information on fee waiver guidelines is included in the supplement.
- By closing date (05/13/2014), must have a valid Candidate Physical Ability Test or CPAT (a valid CPAT is one that has an issue date that is not older than one year prior to the application closing date). OR at time of appointment, ability to take and pass the CPAT.
- At time of appointment, possession of a valid Driver's License.

EXAMINATION: There will be an application supplement weighted at 100%.

STAMFORD RESIDENCY CREDIT: Five (5) points will be added to the passing score of those candidates who attest and provide irrefutable proof of their residency in the City of Stamford, Connecticut for a period of at least twelve (12) months prior to the date of receipt of the application. See the application supplement for more information and required form.

VETERANS' CREDIT: Refer to item 3 of 11 on the Announcement General Conditions" Form for eligibility requirements.

FILING REQUIREMENTS: A completed "City of Stamford Application for Examination or Employment," "Application Supplement 14-08" must be submitted on or before the last filing date (05/13/2014) to be considered eligible for purposes of this examination. A resume and/or other correspondence will not be considered as equivalent to an application.

APPLICATION MATERIAL: The application form, including supplement is available on our website www.stamfordct.gov, or the Human Resources Department located at the Stamford Government Center at 888 Washington Blvd., and at the Stamford Fire Headquarters at 629 Main Street.

PERSONNEL COMMISSION

Frank Green

Julie Granser Marc Teichman Peter Nanos

AN EQUAL OPPORTUNITY EMPLOYER

Clemon W. Williams, Acting Director of Human Resources

ANNOUNCEMENTS GENERAL CONDITIONS

1. Applicants must complete an "Application for Examination" for this examination. In some cases, completion of an application supplement is also required. Applicants must complete every section on the application form. If a question or section is not applicable, enter N/A. Applications must be signed where indicated. Incomplete or illegible applications will be rejected.
2. The Human Resources Department does not formally acknowledge receipt of applications. If an application is rejected as incomplete or illegible, it will be returned to the applicant so noted. If an applicant does not meet the minimum qualification requirements for this position, a disqualification notice will be sent. Applicants meeting the stated minimum qualifications for the position will be notified of the date, time and location of the examination, if applicable.
3. Requirements for claiming veterans' credits are as follows: They are applied only to passing final scores on an Open Competitive Eligible list at the following values: non-disabled veterans-5 points; disabled veterans-10 points. In order to use veterans' points, you must have an "honorable discharge" and been on active duty for at least 90 days (unless separated from service because of a service-connected disability) during the time prescribed by law (8/2/90-present (end date to be determined by law); 2/28/61-7/1/75; 6/27/50-1/31/55; 12/7/41-12/31/46) OR in combat or a combat support role (for at least 90 days, unless separated from service because of a service-connected disability) during Lebanon Conflict (7/1/58-11/1/58); Lebanon peace-keeping mission (9/29/82-3/30/84); invasion of Grenada* (10/25/83-12/15/83); Operation Earnest Will (2/1/87-7/23/87); or the Panama invasion* (12/20/89-1/31/90). (*Since operation lasted for less than 90 days, service must have been for entire duration.) Form 00214 must be submitted as proof of service; no other proof of service is acceptable. It must be submitted with the application or at the time of the examination. Submission of a DD214 after administration of the examination will not be accepted.
4. Applicants must be physically and medically capable of performing the essential functions of the position with or without a reasonable accommodation for which application is made. A post job offer medical examination will be required. This will include a urinalysis for usage of illegal narcotics in accordance with the City of Stamford policy. If a candidate refuses to submit to this examination, it shall be deemed as an incomplete medical examination, and as a voluntary withdrawal from consideration for employment with the City of Stamford. A confirmed positive drug screening will result in a six (6) month disqualification from any City of Stamford position.
5. Candidates for positions requiring a motor vehicle operator's license who do not satisfy the following two requirements will be disqualified: (1) no more than five (5) points currently assessed on the driver's record; and (2) no conviction in the past five (5) years for a major motor vehicle violation, including, but not limited to: driving while intoxicated or under the influence of drugs; failure to stop and report when involved in an accident; homicide or assault arising out of the operation of a motor vehicle; driving during a period while license is under suspension or revoked; operating a vehicle without the owner's permission; eluding or attempting to elude a police officer; reckless, careless, negligent driving; racing or engaging in a speed contest; or loaning an operator's license or registration. Moving violations of a minor nature within the past twelve (12) months shall be reviewed on a case-by-case basis by the appointing department and the Human Resources Department, and may be disqualifying. Nothing contained herein would supersede higher level requirements for specifically sensitive positions, e.g., Bus Driver, Police Officer.
6. It is the responsibility of the applicant to advise the Human Resources Department of any change of address or status affecting eligibility for employment. Such notification must be in writing.
7. The provisions of the Classified Service Rules of the City of Stamford shall apply to the administration and rating of the examination, establishment of the eligible list, certification and appointment of eligibles, examination review and other procedures relating to the employment process.
8. The top three scores on the eligible list will be certified to the appointing authority for consideration. In cases where the fourth (4th) and/or fifth (5th) highest scores are within 5 points of the highest score, candidates with those scores will also be certified. Please note that each ranking may contain multiple candidates.
9. The eligible list established as a result of this announcement will expire two (2) years from the date such list is established by the Director of Human Resources. Any applicant refusing to accept an interview or offer of employment will be removed from the eligible list.
10. The City of Stamford is subject to the requirements of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. The City is obligated to provide reasonable accommodations for otherwise qualified individuals with disabilities. If you wish to request an accommodation, please attach to the application a statement outlining the nature of the disability and requesting an accommodation.
11. No appointment is deemed final until a probationary period is successfully completed.



APPLICATION FOR EXAMINATION OR EMPLOYMENT

The City of Stamford
Human Resources Division
888 Washington Boulevard
P.O. Box 10152
Stamford, CT 06904-2152
Tel. (203) 977-4070

AN EQUAL OPPORTUNITY EMPLOYER

Position applying for
Use Title on Job Announcement

Exam Number

DO NOT WRITE IN THIS SPACE

- ☐ Q
☐ NQ
☐ Educ
☐ Exp
☐ Not City EE
☐ Other

Rev. by:

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.
All blanks must be completed in order for application to be considered.

GENERAL INFORMATION

Name _____				
(Last)		(First)	(Middle)	
Address _____				
(Street/Apt. #)		(City)	(State)	(Zip Code)
Home Telephone _____		Work Telephone _____		
(Area Code)		(Area Code)		
Cellular Telephone _____		E-mail Address _____		
(Area Code)				
Social Security Number _____		Best daytime contact: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell		
(Last six digits ONLY)				
Do you claim 5 points preference based on active duty in the U. S. Armed Forces? (Attach copy of DD214)		Are you currently authorized to work in the United States?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you claim 10 points veteran's disability preference? (Attach DD214 and supporting documentation)		Note: 1986 Immigration Reform & Control Act requires verification of identity and employment eligibility at the time of hire.		
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you ever worked for the City of Stamford before?		If yes, list by dates employed and job title(s):		
<input type="checkbox"/> Yes <input type="checkbox"/> No		_____ _____ _____		

1. Have you ever been convicted of any offense other than juvenile, youthful offender, or a minor traffic violation?
If yes, you must complete Section B of the applicant disclosure form.
☐ Yes ☐ No
2. Have you ever been disqualified for a position with the City of Stamford due to a criminal conviction or failure to fully disclose a criminal conviction?
If yes, list job title and date of disqualification.
☐ Yes ☐ No

(Provide information regarding ACTUAL convictions only. Any arrest, charge, conviction and/or record which has been erased, dismissed, nulled or pardoned pursuant to the CGS § 31-51i, should NOT be disclosed. Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

RECORD OF EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL AND CITY/STATE	DATES ATTENDED	COURSE OF STUDY (Major/Minor)	GRADUATED (Yes/No)	DEGREE, DIPLOMA, G.E.D., AND CERTIFICATE OR CREDITS COMPLETED
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					

Other Training/Certifications (special courses, work training programs, armed forces training) related to the job for which you are applying. Give name and location where training was given, dates attended, subject of training, number of hours weekly, and other details.

Summarize any other Special Skills or Abilities relating to the job you want, such as: licenses, machines you operate, languages which you speak, read and write well, computer skills, and any other special abilities or knowledges.

EMPLOYMENT HISTORY

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY.** Applicants may be required to furnish satisfactory proof of employment history claimed. Use additional pages if necessary. Resumes may be included with a **completed application**.

1. Name and Address of Employer _____	Employed From _____ # of hours _____ per week _____	To _____ Month _____ Year _____ Ending Salary _____
Supervisor Name, Title, Telephone _____		
Your Title _____		
Describe your duties: _____		

Reason for leaving _____		

EMPLOYMENT HISTORY (Continued)

2. Name and Address of Employer _____	Employed From _____ To _____ <small>Month Year Month Year</small> # of hours _____ per week _____ Last Salary _____
Supervisor Name, Title, Telephone _____	
Your Title _____	
Describe your duties: _____ _____ _____ _____	
Reason for leaving _____	

3. Name and Address of Employer _____	Employed From _____ To _____ <small>Month Year Month Year</small> # of hours _____ per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____	
Your Title _____	
Describe your duties: _____ _____ _____ _____	
Reason for leaving _____	

4. Name and Address of Employer _____	Employed From _____ To _____ <small>Month Year Month Year</small> # of hours _____ per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____	
Your Title _____	
Describe your duties: _____ _____ _____ _____	
Reason for leaving _____	

5. Name and Address of Employer _____	Employed From _____ To _____ <small>Month Year Month Year</small> # of hours _____ per week _____ Ending Salary _____
Supervisor Name, Title, Telephone _____	
Your Title _____	
Describe your duties: _____ _____ _____ _____	
Reason for leaving _____	

Do you have any objections to the Human Resources Division verifying your work experience and/or educational qualifications?

I hereby authorize the City of Stamford to verify my work experience and/or educational qualifications.

(A) Your former employer? ☐ Yes ☐ No

(B) Your present employer? ☐ Yes ☐ No

Applicant's Signature

If answer is "Yes" to either (A) or (B) explain under comments section

COMMENTS

MILITARY INFORMATION

Veteran of U.S. Armed Forces	Service Branch	Date Discharged	Type of Discharge	Final Rank
<input type="checkbox"/> Yes				
<input type="checkbox"/> No				

PRE-EMPLOYMENT STATEMENT (Read Carefully)

I certify that all statements made on or in connection with this application are true, complete, and correct to the best of my knowledge and belief. I understand that incomplete, false, inaccurate, or misleading information given in my application, interview(s) or during the course of my employment may result in the rejection of this application; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided, whether willingly or accidental, may result in my immediate dismissal if employed, whenever the omission or falsehood is discovered.

I understand that this application is not a contract of employment nor is it a guarantee or indication of employment. I also understand that should I be granted an interview, the representations that may be made at the interview are not to be construed as creating any obligation, promise or contract on behalf of the City. Should I be employed by the City, in consideration of my employment, I agree to conform to the rules and policies of the City of Stamford, as they may from time to time be implemented or revised. Identification and verification of eligibility to work in the United States must be satisfied for employment.

I further understand that in consideration for employment, an investigative background report may be prepared at the request of the City of Stamford by an independent party, whereby information may be obtained from my employers (present or former), educational institutions, all branches of the U.S. Military service, and public records maintained by government agencies or others, including but not limited to criminal conviction reports, credit reports, etc. I authorize the City of Stamford and its designated representative(s) to perform this investigation, and further authorize present and former employers, references and other persons to provide information for the investigation. I also authorize the City of Stamford to receive criminal conviction records pertaining to me which may be in the files of any criminal justice agency.

I understand that acceptance for employment shall depend on satisfactory replies from my references and other background checks. In the event I receive a job offer, I also understand that I will be subject to a drug test and medical examination that I must pass before I commence work.

I have read, understood, and agree to the foregoing.

Applicant's Signature _____

Date _____



City of Stamford

Applicant Disclosure Form

Section A

1. CANDIDATE INFORMATION

It is the policy of the City of Stamford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, sex, color, religion, national origin, marital status, veteran status or disability unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, we strongly urge that all applicants complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Stamford with the requested information by checking the appropriate box in section four. This information will not affect in any way your employment opportunities. This form will be removed from the application.

2. GENERAL INFORMATION

Your Name _____ Date _____

Social Security Number _____ 000 _____ (Last six digits ONLY)

3. STATISTICAL INFORMATION

Race/Ethnic Identification (Please check one)

American Indian or Alaska Native ☐ All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian ☐ All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American ☐ (Not of Hispanic or Latino origin) All persons having origins in any of the black racial groups of Africa.

Hispanic or Latino ☐ All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.

Native Hawaiian or Other Pacific Islander ☐ All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.

White ☐ (Not of Hispanic or Latino origin) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Other ☐ Please specify _____

Job Classification

Please write the title of the position for which you are applying in the box above, using the title on Job Announcement.

Gender

Female ☐

Male ☐

4. NON-PARTICIPATION

Please check box if applicable

I have read the above statement and have chosen not to complete this form.

☐

5. RECRUITING INFORMATION

How did you hear about this job? (Please check one)

☐ Stamford Advocate

☐ Other newspaper.
Please give name: _____

☐ City Website

☐ Internet
Please give site: _____

☐ City Employee

☐ Human Resources
Division Bulletin Board

☐ Community Agency
Please give name: _____

☐ Professional journal
Please give name: _____

☐ Other. Please specify: _____



City of Stamford

Applicant Disclosure Form

Section B

NOTE:
THIS INFORMATION WILL BE REVIEWED ONLY BY
MEMBERS OF THE HUMAN RESOURCES DIVISION AND
HIRING MANAGERS.

CRIMINAL CONVICTION INFORMATION

Applicants are required to disclose the existence of *any* criminal conviction, regardless of the nature, date or location thereof, with the exception of minor traffic violations or an arrest, criminal charge, or conviction that has been erased. The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon.

The information provided below is subject to the terms of the "Pre-Employment Statement" on Page 4 of this application. A criminal conviction will not necessarily result in the rejection of this application, but will be considered as it relates to the nature of the position sought, and in light of any applicable state and federal law.

Name (Print)

Title of Position Sought

Applicant's Signature

Date

<i>DATE OF CONVICTION</i>	<i>OFFENSE</i>	<i>DATE OF ARREST</i>	<i>PLACE OF ARREST (City/State)</i>	<i>SENTENCE</i>

FIREFIGHTER

APPLICATION SUPPLEMENT #14-08

This material supplements the general examination announcement with additional information about the recruitment process. It also allows applicants to submit required information that is not addressed in the standard application form.

It is strongly recommended that you review this entire supplement before completing any portion thereof.

Thank you for your interest in employment as a City of Stamford Firefighter.

PART I -REVIEW OF APPLICATION MATERIAL

Be certain that you have all the necessary application material, which consists of the following:

- ❖ Firefighter examination announcement;
- ❖ “Announcement General Conditions” (listed on the reverse side of the announcement);
- ❖ “Application for Examination or Employment-Firefighter #14-08”, which consists of four (4) numbered pages as well as a two (2) page Applicant Disclosure Form (Sections A and B);
- ❖ All fourteen (14) pages of this Application Supplement.

If you are missing any form or page as listed above, refer to the City website www.stamfordct.gov. If you are unable to locate the form or page, you should immediately call or visit the Human Resources Department (203-977-4070.)

It is very important that you read and follow written instructions throughout the testing and recruitment process. Failure to do so may result in your disqualification as an applicant/candidate. It is strongly recommended that you keep all material and correspondence related to your Firefighter application/candidacy in a single folder.

Information in the announcement and application supplement is provided as a guide to the application process, and is not intended to be a complete source of information about the testing and selection process. Further information will be provided in future to qualified applicants on an as-needed basis.

DO NOT RETURN THIS PAGE WITH YOUR APPLICATION

REMOVE STAPLE TO DETACH

CPAT GENERAL INFORMATION

The Candidate Physical Ability Test (CPAT) is a practical exam used to test physical ability to perform job tasks related to firefighting. The CPAT was developed by the IAFF/IAFC Joint Labor Management Wellness/Fitness Task Force and is used in the Firefighter selection process of numerous fire departments throughout the state and around the country. In Connecticut, the test is administered by the State Fire Academy in Meriden, CT.

Those applicants who do not currently hold a valid CPAT card must successfully pass the CPAT as a condition of employment. Once the CPAT is successfully passed, candidates must send a copy of their card or certificate to the attention of Vanesa Francis, Human Resources Generalist, City of Stamford Human Resources Department, 888 Washington Blvd., Stamford, CT 06904.

The following link to the Connecticut Fire Academy's website (<http://www.ct.gov/cfpc/cwp/view.asp?Q=246722>) contains detailed information about CPAT content. Any question or concerns not covered therein should be addressed directly to the Academy, which has complete authority over those matters.

DO NOT RETURN THIS PAGE WITH YOUR APPLICATION

INFORMATION CONCERNING STAMFORD RESIDENCY POINTS

Firefighter applicants who wish to apply for five (5) residency preference points as stipulated in City Ordinance #1112 approved 11/9/09 should read this information sheet entirely.

In order to qualify for 5 points residency credit, you must: 1) submit a completed "Residency Credit Application and Affidavit" with your employment application; 2) submit, when *requested*, irrefutable evidence to substantiate that you are a City of Stamford resident and that you have been domiciled in the City of Stamford, Connecticut for a period of at least 12 months prior to the date of receipt of the application; and 3) achieve eligibility status on the application supplement.

For purposes of this ordinance, "domiciled" is defined as "that place where an individual has his/her true, fixed and permanent home, where he or she normally eats and sleeps and maintains his or her normal personal and household effects". Applicants who have a permanent home in Stamford but resided elsewhere during some or all of the required time period for the sole purpose of attending school or compulsory U.S. military service will qualify for credit.

DO NOT SEND ANY DOCUMENTATION ALONG WITH YOUR APPLICATION - IT WILL BE RETURNED TO YOU. You are advised to obtain and retain documentation that comprises irrefutable proof of continuous residency since at least 12 months prior to submission of your application until such time as that documentation is specifically requested by the Human Resources Department.

Documents that may be submitted in support of a residency claim include, but are not limited to, a copy of a lease or mortgage in the candidate's name plus one of the following (also in the candidate's name): cable TV, electric, gas, oil, telephone or water utility bill; checking or savings account statements; or credit card statements. The City of Stamford reserves the right to accept other documents, in lieu of the above, under special circumstances, which substantiate various living arrangements, such as residing with parents, etc., as determined by the Human Resources Department. Remember that you must prove residency over a period of time. Therefore you will be expected to produce documentation as described above that is dated beginning in April or May 2013 (depending on date of receipt of application) as well as the month such documentation is requested.

Insufficient, incomplete, improper or untimely documentation will result in the denial or forfeiture of residency credit. Evidence is subject to additional verification during the post job offer background check. As in the case of any intentional misrepresentation of a material fact on an employment application, candidates who are determined to have intentionally misrepresented or falsified facts concerning Stamford residency shall be disqualified or dismissed. The decision of the Director of Human Resources in all related matters is final and not subject to appeal.

**DO NOT RETURN THIS PAGE WITH YOUR APPLICATION
REMOVE STAPLE TO DETACH**

RESIDENCY CREDIT APPLICATION AND AFFIDAVIT*

Last Name (Please print) First Name

000- -
Social Security Number (Last 6 digits only)

ACKNOWLEDGEMENT AND CERTIFICATION

I hereby attest in good faith that I: 1) am currently a bona fide resident of the City of Stamford, Connecticut; 2) have been domiciled in the City since at least 12 months prior to receipt of this application ; and 3) plan to remain a resident until at least 05/13/2014.

I have read the “Information Concerning Stamford Residency Points” included in the Firefighter application supplement, **and understand** that I bear the burden of proof to support my claim for residency points at the time such proof is requested and/or required.

I understand and agree that: 1) If I am unable to substantiate my claim at that time, I will be denied, or will forfeit, the 5 point addition to my written examination score; and/or 2) If I submit false, inaccurate or misleading information, I am subject to immediate disqualification or dismissal.

Signature of Applicant

Date Signed

*IF applying for residency preference points, this form **MUST** be submitted as an attachment to the “City of Stamford Application for Examination or Employment- Firefighter #14-08” by the last filing date of 05/13/2014.

APPLICATION FEE WAIVER GENERAL INFORMATION

DEFINITIONS

- 1) Poverty Guideline - see chart below.

<u>Size of Family Unit</u>	<u>Annual Income</u>
1	\$11,670
2	15,730
3	19,790
4	23,850
5	27,910
6	31,970
7	36,030
8	40,090

For families/households with more than 8 persons,
add \$4,060 for each additional person

Effective January 22, 2014

DO NOT RETURN THIS PAGE WITH YOUR APPLICATION

APPLICATION/AFFIDAVIT FOR WAIVER OF EXAMINATION FEE

I, _____ certify by my signature below that I
Print Name

qualify for a waiver of the required fee for taking examination number 14-08 for the position of
Firefighter for the following reason(s):

(Check all applicable sections.)

- ___ 1. I am currently receiving public assistance from _____.
List municipal or state agency
- ___ 2. I am currently receiving federal social security disability insurance
benefits.
- ___ 3. I am currently receiving unemployment compensation benefits from the
State of _____.
- ___ 4. My total family income is below the current federal poverty guideline
as defined on the reverse side of this affidavit.

CERTIFICATION: I understand that as penalty for filing a false affidavit, I will be disqualified at
any point in the application/examination process, including removal from the eligibility list, and
will be ineligible to apply for any City of Stamford civil service examination for a period of three
(3) years.

Signature of Applicant

Date

Approved: _____

FIREFIGHTER MEDICAL STANDARDS*

Firefighter candidates must be physically and medically capable of performing the essential functions of the job and are required to undergo a comprehensive post job offer medical screening and examination. Said examination, or portions thereof, will be conducted by the City Physician or, at the discretion of the City Physician or Director of Human Resources, by another qualified medical examiner. Failure of a candidate to participate in or successfully complete any portion of the medical examination shall be grounds for disqualification, without right of appeal.

The City of Stamford has adopted the Medical Requirements for Fire Fighters issued by the National Fire Protection Association (NFPA). These requirements provide for disqualification of candidates who have a medical condition or disorder related to vision, hearing, heart, circulation, lungs, skeletal system or any other bodily part or system that will preclude the candidate from performing the essential functions of the job.

If the City Physician, or other qualified medical examiner who performs an examination on behalf of the City, determines that a candidate has a medical condition or history that is not specifically addressed in the NFPA standards, the examiner shall indicate the finding(s) and render a medical opinion stating whether or not the candidate is able to perform the essential functions of firefighter.

The City Physician has sole authority to review all medical examination results, to interpret and apply the medical standards, and to make the determination as to whether a candidate meets those standards. The interpretations, findings and conclusions of the City Physician are final and not subject to appeal.

It is recommended that candidates who have questions about their ability to qualify due to a medical condition should review the medical standards and consult with a medical authority. The complete NFPA 1582 Comprehensive Occupational Medical Program for Fire Departments, 2013 Edition, are available for inspection in the Human Resources Department at the above address, as well as via this link on the website.

* See also Item 4 of the General Conditions for Job Announcements for additional information regarding the post job offer medical examination.

DO NOT RETURN THIS PAGE WITH YOUR APPLICATION

REMOVE STAPLE TO DETACH

FIREFIGHTER

APPLICATION SUPPLEMENT #14-08

EXPERIENCE AND TRAINING EXAMINATION

NAME _____

[illegible]

(Last six digits)

For this examination, you will be filling out specific information about your training and experience. The information which you give will be used to find out how well your background qualifies you for this position. You **MUST** fill out this examination booklet completely in order to take part in this examination. **CONSIDER THIS BOOKLET TO BE AN EXAMINATION.**

On the pages which follow, you will be asked to supply factual information about your training and about the duties, responsibilities and accomplishments that are associated with jobs which helped you qualify for the position for which you are applying. Your training and experience will be scored according to how closely they relate to the various job components or factors of the position of Firefighter. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet, and a completed “Application for Examination or Employment” must be filed with the Human Resources Department by the last filing date noted in the job announcement, or bear a postmark no later than the last filing date. Information submitted after the last filing date will not be considered.

AN EOE/AA EMPLOYER

PART II - REVIEW OF MINIMUM QUALIFICATION REQUIREMENTS #14-08

A. EDUCATION REQUIREMENT:

At time of application, you must have graduated from an accredited high school or received an equivalency diploma (G.E.D.) from a recognized authority. Do you meet this requirement?

Yes _____ No _____

B. AGE REQUIREMENT:

You must be at least 18 years of age by 05/13/2014. Please provide your date of birth below.

(Month/date/year) _____

C. VOLUNTEER REQUIREMENT:

Are you a current member in good standing with the City of Stamford Volunteer Fire Departments?

Yes _____ No _____

D. CPAT REQUIREMENT:

You must possess a CPAT certificate/card dated no earlier than 05/13/2013 from an accredited IAFF CPAT testing site OR have the ability to take and pass the CPAT.

1. _____ I currently possess a CPAT card dated no earlier than 05/13/2013 from an accredited IAFF CPAT testing site, **a copy of which is included with my application.**
2. _____ I do not possess a CPAT card as required, but I understand that I must take and pass the CPAT as a condition of employment.

*Information about the CPAT test to follow in this supplement for the benefit of those applicants who check this response.

3. Do you have a valid driver's license? Yes _____ No _____
(Please attach a copy)

PART III. EDUCATION, CERTIFICATIONS AND EXPERIENCE (Use additional sheets of paper if necessary.) #14-08

A. POST SECONDARY EDUCATION

1. Degree: Do you possess any of the following degrees? (If "Yes", specify the major field of study for which the degree was conferred.)

Associate's Yes_____ (Major)_____ No_____

Bachelor's Yes_____ (Major)_____ No_____

Master's Yes_____ (Major)_____ No_____

2. Credits: If you did not obtain a college degree but did complete college course work list number of credits earned. _____

B. CERTIFICATIONS

1. Do you possess any of the following certifications? (If yes, please provide a copy of all certifications):

EMT/EMS Certification Yes_____ No_____

EMD Certification Yes_____ No_____

HAZMAT Certification Yes_____ No_____

Other Certifications Yes_____ No_____

List "other" certifications:

C. **EXPERIENCE** - Please answer all questions in this section to the best of your knowledge, give detailed examples that show the depth of your experiences (use additional pages if necessary.)

1. Please state the length of your experience as a volunteer Firefighter with the City of Stamford?

Year(s)_____ Months(s)_____

2. Provide a detailed description of your experience in fire suppression and prevention.

3. Describe your experience with fire inspections?

4. Describe any experience you have with fire training?

5. Describe your knowledge of the State of CT Fire Prevention Code?

6. Do you have working knowledge in any of the following areas? (If “yes” please describe your experience)

EMT/EMS

EMD

HAZMAT Incidents